

UTAH FILM COMMISSION MOTION PICTURE INCENTIVE PROGRAM APPLICATION

MPIP APPLICATION AND SUBMISSION

Fill out the MPIP Application and attach any necessary information. When completed, send the application, via email to vpearce@utah.gov, and 'Cc' melissajackson@utah.gov. All information is required and must be submitted prior to any project being reviewed for an incentive through the State of Utah. Handwritten applications will not be accepted.

If you have any questions or require any assistance filling out the MPIP Application, please contact our office at 801.538.8740 or toll free at 800.453.8824.

To have your MPIP Application to be considered for confidentail and protected status, please fill out the **ATTACHMENT - I GRAMA** form. This form may be filled out by hand.

MPIP PACKET REVIEW VERIFICATION

The MPIP Information Packet is attached to this application. Please download this document or click here to view it.

The following is to be answered by the person that is filling out the application and has full authority to represent the applying production company.

Name	I have read and reviewed the MPIP Information Packet
Title	
Date	



Motion Picture Incentive Program

300 North State Street, Salt Lake City, UT 84114 Phone: 800.453.8824

A 1: .: D :	
Application Date:	
Application bate.	

Project Title & Incent	ive Type		
Project Title:			
	Than a Million Dollars 20%	Estimated Dollars Left in the Stat	re: \$
Incentive Option:	Million Dollars and Greater 20%	Dollar Amount of Incentive Request	ted: \$
	Million Dollars and Greater 25%	Project's Total Budget:	\$
Project Type			
Studio Feature			ature
Television Series	Genre:		
Other:			
Production Company	and Contact Information		
Production Company	y - Entity that will claim the tax credit		
Company Name:			
Type of Company/Stat	te Corporation:	Federal Tax ID Number:	
Mailing Address:			
_	City:	State:	Zip:
Telephone Number:			
Primary Contact Info	rmation	This contact recieve	es State of Utah contract.
Company Name:			
Name:		Title:	
Mailing Address:			
	City:	State:	Zip:
Telephone Number:			
E-Mail Address:			
Secondary Contact Ir	nformation	This contact recieve	es State of Utah contract.
Company Name:			
Name:		Title:	
Mailing Address:			
J	City:	State:	Zip:
Telephone Number:			
E-Mail Address:			

Production Company and Contact Information (Cont'd)			
Person completing th	ne application, if different.		
Name:		Title:	
Mailing Address:			
	City:	State:	Zip:
Telephone Number:			
E-Mail Address:			
	II IN C	This combon and making a	Chata af I lhab a antonat
Contact for Legal Issu	ies and Legal Notices	Inis contact recieves	s State of Utah contract.
Name:			
Mailing Address:	City	Chaha	7:
Talambana Numaban	City:	State:	Zip:
Telephone Number:			
E-Mail Address:			
Executive Producer(s) and Producer(s)		
Executive Producer:		Add IMDb or resume link:	
1.			
2.			
3.			
4.			
Producer:		Add IMDb or resume link:	
1.			
2.			
3.			
4.			
Chack if you plan to	o submit resumes to our office. Not req	uired if a link is provided	
		ulled if a liffk is provided.	
Director(s) and Princi	pal Cast		
Director:		Add IMDb or resume link:	
1.			
2.			
Talent (Principals):		Add IMDb or resume link:	
1.			
2.			
3.			
4.			
	o submit resumes to our office. Not req	uirod if a link is provided	
Check if you plan to	o submit resumes to our office. Not req	uneu n a mik is provided.	

Budget				
Complete Line Item Budget: \$				
Document the amount of the complete budget to be spent	in Utah as dollars left in the state:	\$		
100% Financing Documentation				
Company Name:	Contact Name:			
Mailing Address:				
City:	State:	Zip:		
Telephone Number:				
E-Mail:				
Documentation of Financing:				
Completion Bond				
Is there a completion bond in place?				
Yes Bonding Company Name:				
No				
Distribution Plan				
Describe distribution plan (e.g studio pickup, festival circuit,	etc.) (no more than one paragraph)		
Script and Synopsis				
Submit a synopsis (no more than one paragraph)				
Script: Submit the most current draft of the complete scrip	ot			
The most current script has been submitted to the UFC.	A treatment has been su	ubmitted to the UFC.		
A current script will be sent to the UFC.	A treatment will be sent	to the UFC.		
Note: A current draft of the script must be submitted before an application cases. Please contact the UFC for more Information.	n can be approved. A treatment may be sub	ostituted for a script in some		

Projected Totals			
	Cast	Crew	Extras
Total number of			
Total number of Utah			
Average daily wage for Utah			
Utah Production Dates			
	Start		Finish
Prep dates			
Principal photography			
Wrap dates			
Post production			
Total Number of Utah production	on days:		
List other states where filming w	vill take place and number of d	ays.	
Incentive			
Why is it important to locate this	s film in Utah?		
Wity is it important to locate this	s initi in oturi.		
Are you considering, or have you applied for or received any other state, local or federal incentives or funding?			
Other	areducer over filmed in the Ct	ata of Utah?	□ No.
Has the production company or			No
Is the production company cons		_	No
Describe any outstanding mater the project going forward? If no		on or company that could hav	e a negative impact against

Other (Cont'd)		
References:		
Credit or bank reference of production account:		
Three professional industry references		
Name	Title	Contact
Other information you would like to provide:		
other information you would like to provide.		
By submitting this application you certify that you he company and all information given is complete and c		sent the applying production

UTAH FILM COMMISSION MOTION PICTURE INCENTIVE PROGRAM

ATTACHMENT I – GRAMA

REQUEST FOR PROTECTED RECORD STATUS

(Business Confidentiality Claim)

type):	ss of business and representative making this confidentiality claim (please print or	
•	attached /enclosed information (record) provided to the Governor's Office of Economic OED), or any of its agencies (divisions or programs), be considered confidential and given	
	onal) of the information (record) which is to be covered by this confidentiality claim and which you for protected status.	
The Following reapply:	easons support this claim of business confidentiality; Please check (🗸) all of the following which	
<u> </u>	The Record provided is a trade secret (as defined in U.C.A. 13-24-2).	
) 2.	The record is commercial or non-individual financial information and disclosure of the information could reasonably be expected to result in unfair competitive injury to the provider of the information.	
(_) 3.	The record is commercial or non-individual information and disclosure of the information could reasonably be expected impair the ability of GOED, or its agencies, to obtain necessary information in the future.	
(_) 4.	The record is commercial or non-individual financial information and the interest of the provider in prohibiting access to the information is greater than the interest of the public in obtaining access.	
()5	The information provided may contain the following (see U.C.A. 63G-2-305 for complete information on records which may be classified as protected):	
	a. The record would reveal negotiations regarding assistance or incentives offered by or requested from GOED for the purpose of encouraging a person to expand or locate a business in Utah, but only if disclosure would result in actual economic harm to the person or place GOED at a competitive disadvantage. (U.C.A. 63G-2-305(35)) NOTICE: Records evidencing a final contract may not be classified protected under this section.	
*	cise written statement supporting a business confidentiality claim is required, U.C.A. 63G-2-additional sheets if necessary.	
made that the recrestriction of accuntil the period in	shall be notified if a record claimed to be protected is classified public or if the determination is ord should be disclosed because the interest favoring access outweigh the interest favoring ess. Records claimed to be protected under this business confidentiality claim may not be disclosed a which to bring an appeal expires or the end of the appeals process, including judicial appeal ant, after notice has waived the claim by not appealing or intervening before the record committee).	
By	Date	